

PD9000099797

(Requestor's Name)

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PICK-UP WAIT MAIL

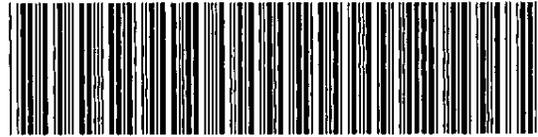
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS
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MRS. 11/21/11

1019-53761

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

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09 DEC 10 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: ASHLEY SMITH

DATE: 12-09-2009

REF. #: 000314.115862

CORP. NAME: RMA MANAGER, INC.

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 532898 FOR \$ 70.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$ _____

PLEASE RETURN:

- CERTIFIED COPY CERTIFICATE OF GOOD STANDING
 CERTIFICATE OF STATUS

PLAIN STAMPED COPY

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 10, 2009

CORPDIRECT AGENTS, INC.
ATTN: ASHLEY SMITH
WALK-IN

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

SUBJECT: RMA MANAGER, INC.
Ref. Number: W09000053761

We have received your document for RMA MANAGER, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and street address must be consistent wherever it appears in your document.

The registered agent name must be listed exactly as it appears in our records.

An effective date may be added to the Articles of Incorporation if a 2010 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 109A00037667

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

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ARTICLES OF INCORPORATION

OF

RMA Manager, Inc.

FILED
09 DEC 10 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned hereby forms a corporation for profit pursuant to Chapter 607 and/or 621, Florida Statutes.

ARTICLE I - NAME

The name of the Corporation shall be RMA Manager, Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business address of the corporation is 200 South Orange Avenue, Suite 2025, Orlando, Florida 32801, and the mailing address of the corporation is 200 South Orange Avenue, Suite 2025, Orlando, Florida 32801.

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is the transaction of any and all lawful business activities.

ARTICLE IV - SHARES

The Corporation is authorized to issue 1000 shares of common stock at \$.01 par value.

ARTICLE V - REGISTERED AGENT

The name and Florida street address of the registered agent is:

Urban Thier Federer & Jackson, P.A.
200 South Orange Avenue, Suite 2025
Orlando, Florida 32801

ARTICLE VI - INCORPORATOR

The name and address of the incorporator is:

CorpDirect Agents, Inc.
515 East Park Avenue
Tallahassee, Florida 32301

FILED

09 DEC 10 AM 10:07

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

The undersigned incorporator has executed these Articles of Incorporation this 9th day of
December, 2009.

CorpDirect Agents, Inc.

By: Katie Wonsch
Katie Wonsch

FILED

09 DEC 10 AM 10:08

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**ACCEPTANCE OF APPOINTMENT OF
REGISTERED AGENT**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED REGISTERED AGENT SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is RMA MANAGER, INC., a Florida corporation.
2. The name and address of the registered agent and its office is:

Urban Thier Federer & Jackson, P.A.

200 South Orange Avenue
Suite 2025
Orlando, FL 32801

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the certificate, the undersigned hereby accepts the appointment as registered agent and agree to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligation of his position as registered agent.

Urban Thier Federer & Jackson, P.A.

By: 
Carl Christian Thier, as its President

Dated this 8 day of December, 2009.